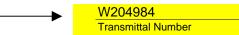
Enter your transmittal number



Your unique Transmittal Number can be accessed online: http://mass.gov/dep/service/online/trasmfrm.shtml or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection Transmittal Form for Permit Application and Payment

1. Please type or print. A separate	A.	Permit Information					
Transmittal Form		BWP IW 38		Industrial Sewer User in IPP POTW			
must be completed		Permit Code: 7 or 8 character code from permit instructions Existing Connection		Name of Permit Category			
for each permit application.				,			
аррисацоп.		3. Type of Project or Activity					
2. Make your							
check payable to the Commonwealth	B. Applicant Information – Firm or Individual						
of Massachusetts	Raytheon Company						
and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211.		Name of Firm - Or, if party needing this approval is an individual enter name below:					
		Balukonis Brian					
		2. Last Name of Individual	3. First	Name of Individual	4. MI		
		350 Lowell Street					
3. Three copies of		5. Street Address	B 4 A	04040	(070) 470 7000		
this form will be needed. Copy 1 - the		Andover	MA	01810	(978)470-7690	40 5 4 #	
		6. City/Town	7. State	8. Zip Code	9. Telephone #	10. Ext. #	
		Brian Balukonis			nis@raytheon.com		
original must		11. Contact Person		12. e-mail address			
accompany your	C. Facility, Site or Individual Requiring Approval						
permit application. Copy 2 must	2 must npany your Raytheon Company						
accompany your							
fee payment.		Name of Facility, Site Or Individual					
Copy 3 should be		350, 358, 362 Lowell Street					
retained for your records		2. Street Address			()		
		Andover	MA	01810	(978)470-7690		
4. Both fee-paying and exempt		3. City/Town 130124	4. State	5. Zip Code	6. Telephone #	7. Ext. #	
applicants must mail a copy of this		8. DEP Facility Number (if Known) 9. Federal I.D. Number (if Known) 10. BWSC Tracking # (if Known)					
transmittal form to:	D.	D. Application Prepared by (if different from Section B)*					
MassDEP							
P.O. Box 4062	1 Name of Firm Or Individual						
Boston, MA 02211		1. Name of Film Of Individual					
02211		2. Address					
* Note: For BWSC Permits, enter the LSP.							
	,	3. City/Town	4. State	5. Zip Code	6. Telephone #	7. Ext. #	
		8. Contact Person		9. LSP Number (BV	WSC Permits only)		
	E. Permit - Project Coordination						
	۲.	r eriiit - r roject coordinatio	11				
	1.	1. Is this project subject to MEPA review? ☐ yes ☒ no					
		If yes, enter the project's EOEA file number - assigned when an					
	Environmental Notification Form is submitted to the MEPA unit:						
	EOEA File Number						
	F. Amount Due						
DEP Use Only	Special Provisions:						
5	1.	2 •• • • • • • • • • • • • • • • • • •					
Permit No:	0	There are no fee exemptions for BWSC permits, regardless of applicant status.					
Doo'd Dots:	2. 3.						
Rec'd Date:	4. Homeowner (according to 310 CMR 4.02).						
Reviewer:		4000557064	\$1,605		01/10/08		
		Check Number	Dollar Amount		Date		

w204984_trans_form • rev. 1/07